



California MCLE Certificate of Attendance

Provider Name: _____ **Provider No.:** _____

Title of Activity: _____

Location of the Activity (*City, State/Country/Remote*): _____

Date & Time of the Activity: _____

Minimum Continuing Legal Education (MCLE) Credit Hours Awarded for the Above Activity:

Credit Type	Credit Hours
General MCLE	
Legal Ethics	
Recognition & Elimination of Bias	
Implicit Bias	
Prevention & Detection Competence	
Wellness Competence	
Technology in the Practice of Law	
Civility in the Legal Profession	
Total	

**Below section is to be completed by the Paralegal, California Licensee and/or the
Provider after participation in the activity**

Name of Paralegal or CA Licensee (*print name*)

CA Bar Number

Signature of Paralegal or CA Licensee



CERTIFICATE OF ATTENDANCE

Retain this form **and submit a copy** to the CCLS Certifying Board, together with an Application for Recertification, and the recertification fee no later than the date on which your current certification expires.

_____ has attended the following program approved by the CCLS® Certifying Board for recertification hours:

Date of Program: October 9, 2024 6:00 p.m. - 7:30 p.m.

Title of Program: Criminal Law 101: From a District Attorney's Perspective

Location: McManis Faulkner, 50 W. San Fernando St., 10th Floor, San Jose, CA 95113

Actual Length of Program (Excluding 1.0 Meals): _____

This program has been approved for the following maximum 1.0 hour(s):

Provider Name: Legal Professionals Incorporated

Date: October 9, 2024

Provider Signature (above)

Name: Vivian L. Shreve, CCLS

Title: Governor/MCLE Coordinator